	ATION FEE DETER		CORD	וח/ או	1146
. CLAIM!	SAS FILED - PART	1			1149
TOTAL CLAIMS	(Column 1)	(Column 2)	SMALL EN		OTHER THAN
			RATE		SMALL ENTITY
FOR	NUMBER FILED	NUMBER EXTRA			PLATE FEE
TOTAL CHARGEABLE CLAIM	s minus 20=		BASIC FEE	OR	asic fee
INDEPENDENT CLAIMS		•	X\$ 25=	OR ·	X\$50=
MULTIPLE DEPENDENT CLAIR	minus 3 =		.X100a	——————————————————————————————————————	(200=
			1 1	OR /	(200:
* If the difference in column 1	is less than zero, enter	"O" in column 2	+180=	OR +	360-
	AMENDED - PART		TOTAL	OR TO	OTAL .
(Column 1			•		THER THAN
CLAULO	HIGHE		SMALLEN	MY OR SI	WALL ENTITY
AFTER AMENOMENT	PREVIOL	SLY EXTRA		DOI- DNAL B	· ADDI-
Total . 71	Minus PAID F	OR CONTRACT		EE R	ATE TIONAL FEE
Total . 21	Indinus O	1 0	X\$ 25+	OR XS	50=
FIRST PRESENTATION OF I		2   • ()	X100=	A"  -	
	OCTIPCE DEPENDENT C	MAIM		JOR X2	00=
	•		•180=	OR +3	50=
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7	(Column				PEEL
G-16-00 REMAINING AFTE II AMERITY TOTAL . 2 Independent . 3	NUMBER PREVIOUS	PRESENT	ADI		ADDI:
Total AMEHONICHT	PAID FOR		PATE TION		TE' TIONAL
Independent	Minus 🙀 2	1-0	X\$ 25=		FEE.
FIRST PRESENTATION	Linus 🟎 3	- 0	<del></del>	POR X\$5	0=
FIRST PRESENTATION OF LICE	LTII'LE DEPENDENT OL	AIM 🔲	X190=	OR X200	)= /
1/2///		•	+180=	OR +360	
0/31/06			TOTAL		ML.
(Column 1)	(Column 2	(Column 3)	ADDIT. FEE	ADDIT.	EE
REMAIL :	HIGHEST. NUMBER		1000		
AFT: -	PREVIOUSLY	EXTRA	RATE TIONA		ADDI-
	lines at	0	FEE	1	TIONAL
Independent .	inus - 2	<del>- </del>	X\$ 25=	OR X\$50:	
PRST PRESENTATION C	LE CEPENDENT CLAN	<del></del>	X100=	T Junior	
		┸		OR X200s	<u>'</u>
		·	+180= .	OR +360=	